

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

5360 LEGACY DRIVE

☐Check if different  
than previously  
reported. (ACC)

PLANO

TX

75024

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00313312

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☒October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2010

through

09

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Catherine L Shipp

Signature of Treasurer

Electronically Filed by Catherine L Shipp

Date

10

12

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M  
0 7D D  
0 1Y Y Y Y  
2 0 1 0

To:

M M  
0 9D D  
3 0Y Y Y Y  
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y 2010</span>		55145.70
(b) Cash on Hand at Beginning of Reporting Period .....	70639.22	
(c) Total Receipts (from Line 19) .....	2668.54	11362.06
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	73307.76	66507.76
7. Total Disbursements (from Line 31) .....	31500.00	24700.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	41807.76	41807.76
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	2298.96	5328.84
(ii) Unitemized .....	369.58	6033.22
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2668.54	11362.06
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2668.54	11362.06
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2668.54	11362.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2668.54	11362.06

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31500.00	24700.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	31500.00	24700.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31500.00	24700.00	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2668.54	11362.06
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2668.54	11362.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Danny Anderson

Mailing Address 5360 Legacy Drive  
Building 2 Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Sourcing Procurement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8249

Amount of Each Receipt this Period

60.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Danny Anderson

Mailing Address 5360 Legacy Drive  
Building 2 Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Sourcing Procurement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8287

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Danny Anderson

Mailing Address 5360 Legacy Drive  
Building 2 Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Sourcing Procurement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8311

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Danny Anderson

Mailing Address 5360 Legacy Drive  
Building 2 Suite 100City State Zip Code  
Plano TX 75024FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Safety-KleenOccupation  
VP Sourcing Procurement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

Transaction ID: SA11AI.8345

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Danny Anderson

Mailing Address 5360 Legacy Drive  
Building 2 Suite 100City State Zip Code  
Plano TX 75024FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Safety-KleenOccupation  
VP Sourcing Procurement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	0

Transaction ID: SA11AI.8368

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Steve Black

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100City State Zip Code  
Plano TX 75024FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Safety-KleenOccupation  
VP Human Resources West Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	1	0

Transaction ID: SA11AI.8252

Amount of Each Receipt this Period

38.46

Contribution

SUBTOTAL of Receipts This Page (optional) .....

98.46

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Steve Black

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Human Resources West Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8288

Amount of Each Receipt this Period

19.23

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Steve Black

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Human Resources West Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8312

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Steve Black

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Human Resources West Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8346

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

57.69

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Steve Black

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Human Resources West Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8369

Amount of Each Receipt this Period

19.23

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Daniel Callaghan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Waste Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8253

Amount of Each Receipt this Period

38.46

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Daniel Callaghan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Waste Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8289

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

76.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Daniel Callaghan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Waste Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8313

Amount of Each Receipt this Period

19.23

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Daniel Callaghan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Waste Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8347

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Daniel Callaghan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Waste Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8370

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

57.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael Crawford

Mailing Address 6625 W. Frye Rd

City

State

Zip Code

Chandler

AZ

85226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.72

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8314

Amount of Each Receipt this Period

11.54

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael Crawford

Mailing Address 6625 W. Frye Rd

City

State

Zip Code

Chandler

AZ

85226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8348

Amount of Each Receipt this Period

11.54

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Michael Crawford

Mailing Address 6625 W. Frye Rd

City

State

Zip Code

Chandler

AZ

85226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8371

Amount of Each Receipt this Period

11.54

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

34.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David E Eckelbarger

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
SVP Business Process & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.05

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8255

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

David E Eckelbarger

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
SVP Business Process & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.05

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8291

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

David E Eckelbarger

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
SVP Business Process & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

948.05

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8315

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David E Eckelbarger

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
SVP Business Process & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.05

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8349

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

David E Eckelbarger

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
SVP Business Process & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.05

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8372

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Jerich

Mailing Address 5360 Legacy Drive Bldg 2 Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director Oil Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8295

Amount of Each Receipt this Period

12.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

62.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Jerich

Mailing Address 5360 Legacy Drive Bldg 2 Suite 100

City State Zip Code  
 Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director Oil Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8319

Amount of Each Receipt this Period

12.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Jerich

Mailing Address 5360 Legacy Drive Bldg 2 Suite 100

City State Zip Code  
 Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director Oil Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8353

Amount of Each Receipt this Period

12.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Jerich

Mailing Address 5360 Legacy Drive Bldg 2 Suite 100

City State Zip Code  
 Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director Oil Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8375

Amount of Each Receipt this Period

12.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

36.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Connie R Kopp

Mailing Address 568 Briarwood Lane

City

Port Washington

State

WI

Zip Code

53074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.24

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8261

Amount of Each Receipt this Period

30.78

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Connie R Kopp

Mailing Address 568 Briarwood Lane

City

Port Washington

State

WI

Zip Code

53074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.63

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8296

Amount of Each Receipt this Period

15.39

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Connie R Kopp

Mailing Address 568 Briarwood Lane

City

Port Washington

State

WI

Zip Code

53074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.02

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8320

Amount of Each Receipt this Period

15.39

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

61.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Connie R Kopp

Mailing Address 568 Briarwood Lane

City

Port Washington

State

WI

Zip Code

53074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.41

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8354

Amount of Each Receipt this Period

15.39

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Connie R Kopp

Mailing Address 568 Briarwood Lane

City

Port Washington

State

WI

Zip Code

53074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.80

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8376

Amount of Each Receipt this Period

15.39

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Timothy R Kotrla

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City

Plano

State

TX

Zip Code

75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen Systems Inc

Occupation

Director Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8262

Amount of Each Receipt this Period

40.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

70.78

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Timothy R Kotrla

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems Inc

Occupation  
Director Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8297

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Timothy R Kotrla

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems Inc

Occupation  
Director Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8321

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Timothy R Kotrla

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems Inc

Occupation  
Director Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8355

Amount of Each Receipt this Period

20.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Timothy R Kotrla

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Systems Inc

Occupation  
Director Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8377

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Rodney K Martin

Mailing Address 11249 White Water Way

City State Zip Code  
Fishers IN 46038

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8265

Amount of Each Receipt this Period

38.46

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Rodney K Martin

Mailing Address 11249 White Water Way

City State Zip Code  
Fishers IN 46038

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8300

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

77.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Rodney K Martin

Mailing Address 11249 White Water Way

City

State

Zip Code

Fishers

IN

46038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Market Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8324

Amount of Each Receipt this Period

19.23

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Rodney K Martin

Mailing Address 11249 White Water Way

City

State

Zip Code

Fishers

IN

46038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Market Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8358

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Rodney K Martin

Mailing Address 11249 White Water Way

City

State

Zip Code

Fishers

IN

46038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Market Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8380

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

57.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. John Reger

Mailing Address 920 Davis Drive, 4th Floor

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8266

Amount of Each Receipt this Period

40.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mr. John Reger

Mailing Address 920 Davis Drive, 4th Floor

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8301

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mr. John Reger

Mailing Address 920 Davis Drive, 4th Floor

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8325

Amount of Each Receipt this Period

20.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

80.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mr. John Reger

Mailing Address 920 Davis Drive, 4th Floor

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8359

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mr. John Reger

Mailing Address 920 Davis Drive, 4th Floor

City

Elgin

State

IL

Zip Code

60123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen Systems, Inc.

Occupation  
Director IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8381

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Carla Rolnic

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City

Plano

State

TX

Zip Code

75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation  
Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8267

Amount of Each Receipt this Period

80.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Carla Rolnic

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8302

Amount of Each Receipt this Period

40.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Carla Rolnic

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8326

Amount of Each Receipt this Period

40.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Carla Rolnic

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8360

Amount of Each Receipt this Period

40.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Carla Rolnic

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8382

Amount of Each Receipt this Period

40.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Billy Ray Ross Jr

Mailing Address 114 Riverview Ct.

City State Zip Code  
Winters CA 95694

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Environmental Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8268

Amount of Each Receipt this Period

78.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Billy Ray Ross Jr

Mailing Address 114 Riverview Ct.

City State Zip Code  
Winters CA 95694

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
VP Environmental Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8303

Amount of Each Receipt this Period

39.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

157.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Billy Ray Ross Jr

Mailing Address 114 Riverview Ct.

City

Winters

State

CA

Zip Code

95694

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

VP Environmental Compliance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8327

Amount of Each Receipt this Period

39.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Billy Ray Ross Jr

Mailing Address 114 Riverview Ct.

City

Winters

State

CA

Zip Code

95694

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

VP Environmental Compliance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8361

Amount of Each Receipt this Period

39.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Billy Ray Ross Jr

Mailing Address 114 Riverview Ct.

City

Winters

State

CA

Zip Code

95694

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

VP Environmental Compliance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8383

Amount of Each Receipt this Period

39.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

117.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City

W. Bloomfield

State

MI

Zip Code

48323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Lubricant Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8269

Amount of Each Receipt this Period

38.46

Contribution

**B.**

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City

W. Bloomfield

State

MI

Zip Code

48323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Lubricant Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8304

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City

W. Bloomfield

State

MI

Zip Code

48323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Lubricant Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8328

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

76.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City

W. Bloomfield

State

MI

Zip Code

48323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Lubricant Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8362

Amount of Each Receipt this Period

19.23

Contribution

**B.**

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City

W. Bloomfield

State

MI

Zip Code

48323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation

Director, Lubricant Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8384

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Sean Spaziani

Mailing Address 5360 Legacy Drive  
Bldg 2 Suite 100

City

Plano

State

TX

Zip Code

75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen Inc.

Occupation

Director West Sales Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.72

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8329

Amount of Each Receipt this Period

11.54

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 27 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Sean Spaziani

Mailing Address 5360 Legacy Drive  
Bldg 2 Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Inc.

Occupation  
Director West Sales Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.26

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8363

Amount of Each Receipt this Period

11.54

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Sean Spaziani

Mailing Address 5360 Legacy Drive  
Bldg 2 Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen Inc.

Occupation  
Director West Sales Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8385

Amount of Each Receipt this Period

11.54

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jean Sullivan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr Director Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8263

Amount of Each Receipt this Period

57.70

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

80.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jean Sullivan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr Director Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.45

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8298

Amount of Each Receipt this Period

28.85

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jean Sullivan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr Director Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.30

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8322

Amount of Each Receipt this Period

28.85

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jean Sullivan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr Director Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.15

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8356

Amount of Each Receipt this Period

28.85

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

86.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Jean Sullivan

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation  
Sr Director Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8378

Amount of Each Receipt this Period

28.85

Contribution

B.

Full Name (Last, First, Middle Initial)

Mitchell Windsor

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation  
Vice President Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8272

Amount of Each Receipt this Period

60.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mitchell Windsor

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-Kleen

Occupation  
Vice President Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8307

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

118.85

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mitchell Windsor

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Vice President Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8331

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mitchell Windsor

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Vice President Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8365

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mitchell Windsor

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Vice President Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8387

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Wojnarowski

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Customer Service Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8273

Amount of Each Receipt this Period

38.46

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Wojnarowski

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Customer Service Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8308

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Wojnarowski

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Customer Service Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8332

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

76.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Wojnarowski

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Customer Service Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8366

Amount of Each Receipt this Period

19.23

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Wojnarowski

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Director, Customer Service Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.8388

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Philip Zink

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr. Director Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.8274

Amount of Each Receipt this Period

38.46

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

76.92

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 43

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Philip Zink

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr. Director Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.91

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.8309

Amount of Each Receipt this Period

19.23

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Philip Zink

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr. Director Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.8333

Amount of Each Receipt this Period

19.23

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Philip Zink

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City State Zip Code  
Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Safety-Kleen

Occupation  
Sr. Director Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 1 0

Transaction ID: SA11AI.8367

Amount of Each Receipt this Period

19.23

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

57.69

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 43

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Philip Zink

Mailing Address 5360 Legacy Drive  
Building 2, Suite 100

City	State	Zip Code
Plano	TX	75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Safety-KleenOccupation  
Sr. Director Engineering

Receipt For:

☐ Primary
 ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	0

Transaction ID: SA11AI.8389

Amount of Each Receipt this Period

19.23

Contribution

SUBTOTAL of Receipts This Page (optional) .....

19.23

TOTAL This Period (last page this line number only) .....

2298.96

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 43

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
A Lot of People who Support Jeff Bingaman

Mailing Address P.. Box 16210

City Albuquerque State NM Zip Code 87191

Purpose of Disbursement  
Contribution

Candidate Name  
JEFF BINGAMAN

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NM District: 00

Transaction ID: SB23.8343

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
BECERRA FOR CONGRESS

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement  
Contribution

Candidate Name  
XAVIER BECERRA

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 31

Transaction ID: SB23.8404

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
BLUMENAUER FOR CONGRESS

Mailing Address 830 NE Holladay Suite 105

City Portland State OR Zip Code 97232

Purpose of Disbursement  
Contribution

Candidate Name  
EARL BLUMENAUER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 03

Transaction ID: SB23.8422

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 / 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
BOB ETHERIDGE FOR CONGRESS COMMITTEEMailing Address POST OFFICE BOX 28001  
PO BOX 28001

City RALEIGH State NC Zip Code 27611

Purpose of Disbursement  
ContributionCandidate Name  
BOB ETHERIDGECategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 02

Transaction ID: SB23.8340

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
CHARLES A. GONZALEZ CONGRESSIONAL CAMPAIGN

Mailing Address PO Box 12612

City San Antonio State TX Zip Code 78212

Purpose of Disbursement  
ContributionCandidate Name  
CHARLES A GONZALEZCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 20

Transaction ID: SB23.8414

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
CONGRESSMAN JOE BARTON COMMITTEE, THE

Mailing Address P.O. Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement  
ContributionCandidate Name  
JOE L BARTONCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 06

Transaction ID: SB23.8391

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 / 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE

Mailing Address 6380 Wilshire Blvd. #1612

City State Zip Code  
Los Angeles CA 90048Purpose of Disbursement  
ContributionCandidate Name  
HENRY A. WAXMANCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 30

Transaction ID: SB23.8417

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

DAVE CAMP FOR CONGRESS 2008

Mailing Address 5915 EASTMAN AVE. SUITE 100  
5915 EASTMAN AVE. SUITE 100City State Zip Code  
MIDLAND MI 48640Purpose of Disbursement  
ContributionCandidate Name  
DAVID LEE CAMPCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: SB23.8413

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

EARL POMEROY FOR CONGRESS

Mailing Address Post Office Box 9336

City State Zip Code  
Fargo ND 58106Purpose of Disbursement  
ContributionCandidate Name  
EARL R. POMEROYCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ND District: 00

Transaction ID: SB23.8409

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 / 43

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS FOR HARRY REID

Mailing Address P.O. BOX 19163

City  
LAS VEGASState  
NVZip Code  
89132Purpose of Disbursement  
ContributionCandidate Name  
HARRY REIDCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 00

Transaction ID: SB23.8338

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

**B.**

Full Name (Last, First, Middle Initial)

FRIENDS OF BARBARA BOXER

Mailing Address PO BOX 641751

City  
LOS ANGELESState  
CAZip Code  
90064Purpose of Disbursement  
ContributionCandidate Name  
BARBARA BOXERCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 00

Transaction ID: SB23.8337

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	0

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS OF BLANCHE LINCOLN

Mailing Address PO BOX 3197

City  
LITTLE ROCKState  
ARZip Code  
72203Purpose of Disbursement  
ContributionCandidate Name  
BLANCHE LAMBERT LINCOLNCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AR District: 00

Transaction ID: SB23.8403

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	1	0

Amount of Each Disbursement this Period

1000.00									
---------	--	--	--	--	--	--	--	--	--

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 43

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JIM OBERSTAR

Mailing Address 1017 8th St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name  
JAMES L HON. OBERSTAR

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 08

Transaction ID: SB23.8336

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
GEOFF DAVIS FOR CONGRESS

Mailing Address 3161 Dixie Highway  
Suite F

City Erlanger State KY Zip Code 41018

Purpose of Disbursement  
Contribution

Candidate Name  
GEOFFREY C DAVIS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: KY District: 04

Transaction ID: SB23.8406

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement  
Contribution

Candidate Name  
CHARLES E GRASSLEY

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 00

Transaction ID: SB23.8335

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 43

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

## **A.** Full Name (Last, First, Middle Initial) **HATCH ELECTION COMMITTEE INC**

Mailing Address 175 SOUTH WEST TEMPLE SUITE 650

City State Zip Code  
**SALT LAKE CITY UT 84101**

Purpose of Disbursement  
 Contribution

Candidate Name  
**ORRIN G HATCH**

Category/  
 Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: UT District: 00

**Transaction ID: SB23.8339**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 09 2010

Amount of Each Disbursement this Period

2500.00

## **B.** Full Name (Last, First, Middle Initial) **HIGGINS FOR CONGRESS**

Mailing Address PO BOX 28

City State Zip Code  
**BUFFALO NY 14220**

Purpose of Disbursement  
 Contribution

Candidate Name  
**BRIAN HIGGINS**

Category/  
 Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 27

**Transaction ID: SB23.8400**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 22 2010

Amount of Each Disbursement this Period

1000.00

## **C.** Full Name (Last, First, Middle Initial) **HOYER FOR CONGRESS**

Mailing Address 7905 MALCOLM ROAD SUITE 102

City State Zip Code  
**CLINTON MD 20735**

Purpose of Disbursement  
 Contribution

Candidate Name  
**STENY HAMILTON HOYER**

Category/  
 Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 05

**Transaction ID: SB23.8420**

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 16 2010

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
JOE DONNELLY FOR CONGRESS

Mailing Address PO Box 1961

City State Zip Code  
South Bend IN 46634

Purpose of Disbursement  
Contribution

Candidate Name  
JOSEPH SIMON MR. DONNELLY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 02

Transaction ID: SB23.8279

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 21 2010

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
LARSON FOR CONGRESS

Mailing Address 29 RUFF CIRCLE

City State Zip Code  
GLASTONBURY CT 06033

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN B LARSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District: 01

Transaction ID: SB23.8396

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 22 2010

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
LEVIN FOR CONGRESS

Mailing Address PO Box 37

City State Zip Code  
Roseville MI 48066

Purpose of Disbursement  
Contribution

Candidate Name  
SANDER M MR LEVIN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: SB23.8283

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 19 2010

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

**3000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LEVIN FOR CONGRESS

Mailing Address PO Box 37

City  
Roseville

State  
MI

Zip Code  
48066

Purpose of Disbursement  
Contribution

Candidate Name  
SANDER M MR LEVIN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: SB23.8416

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

MARKEY COMMITTEE, THE

Mailing Address PO Box 526

City  
Medford

State  
MA

Zip Code  
02155

Purpose of Disbursement  
Contribution

Candidate Name  
EDWARD J MR. MARKEY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District: 07

Transaction ID: SB23.8397

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Mailing Address 76 MAGNOLIA TERRACE

City  
SPRINGFIELD

State  
MA

Zip Code  
01108

Purpose of Disbursement  
Contribution

Candidate Name  
RICHARD E MR. NEAL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District: 02

Transaction ID: SB23.8421

Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
**ROSKAM FOR CONGRESS COMMITTEE**

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement  
Contribution

Candidate Name  
**PETER ROSKAM**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 06

**Transaction ID:** SB23.8392

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**TEXANS FOR SENATOR JOHN CORNYN INC**

Mailing Address 6850 AUSTIN CENTRE BLVD  
 SUITE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement  
Contribution

Candidate Name  
**JOHN CORNYN**

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 00

**Transaction ID:** SB23.8405

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**VISCLOSKY FOR CONGRESS**

Mailing Address P.O. Box 10003

City Merrillville State IN Zip Code 46411

Purpose of Disbursement  
Contribution

Candidate Name  
**PETER J VISCLOSKY**

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 01

**Transaction ID:** SB23.8390

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**4500.00**

**TOTAL** This Period (last page this line number only) .....

**31500.00**